

NAME: _____

ADDRESS: _____

EMAIL: _____

WORK PHONE: _____

HOME PHONE: _____

**For each car you own and
list with us a current copy
of the car registration
including the car model
must be included with this
application otherwise it will
be returned.**

NOTICE ON REPLACEMENT PERMIT

Replacement of original parking permits that have been lost, etc. will be at the applicable regular rate charge only. Customers are urged to treat permits as any other item of value. Permits upon issue become the sole responsibility of customer.

Parking Administration

Village of Croton-on-Hudson, NY 10520-2525

WARNING: For vehicles held in title by applicant only, non-transferable.

In consideration of being permitted to use Village parking lot, I assume all risk of damage or injury to person or property that may result from or arise out of such use and hereby waive, release and discharge the Village of Croton-on-Hudson, its agents and employees from any liability therefor.

DATE: _____ SIGNED: _____

APPLICATION FOR MONTHLY PARKING PERMIT
Return To:

MUNICIPAL BUILDING
ONE VAN WYCK STREET
CROTON-ON-HUDSON, NY 10520-2525